

LEGISLATIVE ACTION		
Senate		House
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Senator Burgess moved the following:

Senate Amendment (with title amendment)

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Delete lines 2479 - 2839

4 and insert:

insured, resident relatives not excluded pursuant to s. 627.747, and any person operating the insured motor vehicle with the express or implied permission of a named insured unless excluded pursuant to s. 627.747, at a limit of at least \$5,000 for medical expense incurred due to bodily injury, sickness, or disease arising out of the ownership, maintenance, or use of a motor vehicle. The coverage must provide an additional death



benefit of at least \$5,000.

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- (a) Before issuing a new motor vehicle liability insurance policy that is furnished as proof of financial responsibility under s. 324.031, the insurer must offer medical payments coverage at limits of \$5,000 and \$10,000. The insurer may also offer medical payments coverage at any limit greater than \$5,000.
- (b) The insurer must offer medical payments coverage with no deductible. The insurer may also offer medical payments coverage with a deductible not to exceed \$500.
- (c) Each motor vehicle liability insurance policy that is furnished as proof of financial responsibility under s. 324.031 is deemed to have:
- 1. Medical payments coverage to a limit of \$5,000, unless a named insured selects a limit greater than \$5,000 or the insurer obtains a named insured's written refusal of medical payments coverage. The rejection of coverage must be made on a form approved by the office.
- 2. No medical payments coverage deductible, unless the insurer obtains a named insured's written selection of a deductible up to \$500. The selection of a deductible must be made on a form approved by the office.
- (d)1. The forms referenced in subparagraphs (c)1. and 2. must fully advise the applicant or insured of the nature of the coverage being rejected or the policy limit or deductible being selected. If the form is signed by a named insured, it is conclusively presumed that there was an informed, knowing rejection of the coverage or election of the policy limit or deductible.

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- 2. Unless a named insured requests in writing the coverage specified in this section, it need not be provided in or supplemental to any other policy that renews, insures, extends, changes, supersedes, or replaces an existing policy if a named insured has rejected the coverage specified in this section or has selected an alternative coverage limit or deductible. At least annually, the insurer shall provide to the named insured a notice of the availability of such coverage in a form approved by the office. The notice must be part of, and attached to, the notice of premium and must provide for a means to allow a named insured to request medical payments coverage at the limits and deductibles required to be offered under this section. The notice must be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to medical payments coverage if a named insured has not signed a selection or rejection form.
- (e) This section may not be construed to limit any other coverage made available by an insurer.
- (2) Upon receiving notice of an accident that is potentially covered by medical payments coverage benefits, the insurer must reserve \$5,000 of medical payments coverage benefits for payment to physicians licensed under chapter 458 or chapter 459 or dentists licensed under chapter 466 who provide emergency services and care, as defined in s. 395.002, or who provide hospital inpatient care. The amount required to be held in reserve may be used only to pay claims from such physicians or dentists until 30 days after the date the insurer receives notice of the accident. After the 30-day period, any amount of the reserve for which the insurer has not received notice of

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such claims may be used by the insurer to pay other claims. This subsection does not require an insurer to establish a claim reserve for insurance accounting purposes.

- (3) An insurer providing medical payments coverage benefits may not:
- (a) Seek a lien on any recovery in tort by judgment, settlement, or otherwise for medical payments coverage benefits, regardless of whether suit has been filed or settlement has been reached without suit; or
- (b) Bring a cause of action against a person to whom or for whom medical payments coverage benefits were paid, except when medical payments coverage benefits were paid by reason of fraud committed by that person.
- (4) An insurer providing medical payments coverage may include provisions in its policy allowing for subrogation for medical payments coverage benefits paid if the expenses giving rise to the payments were caused by the wrongful act or omission of another who is not also an insured under the policy paying the medical payments coverage benefits. However, this subrogation right is inferior to the rights of the injured insured and is available only after all the insured's damages are recovered and the insured is made whole. An insured who obtains a recovery from a third party of the full amount of the damages sustained and delivers a release or satisfaction that impairs a medical payments insurer's subrogation right is liable to the insurer for repayment of medical payments coverage benefits less any expenses of acquiring the recovery, including a prorated share of attorney fees and costs, and shall hold that net recovery in trust to be delivered to the medical payments

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insurer. The insurer may not include any provision in its policy allowing for subrogation for any death benefit paid.

Section 46. Subsections (1) and (7) of section 627.727, Florida Statutes, are amended to read:

627.727 Motor vehicle insurance; uninsured and underinsured vehicle coverage; insolvent insurer protection.-

(1) A No motor vehicle liability insurance policy that which provides bodily injury liability coverage may not shall be delivered or issued for delivery in this state with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state, unless uninsured motor vehicle coverage is provided therein or supplemental thereto for the protection of persons insured thereunder who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, or disease, including death, resulting therefrom. However, the coverage required under this section is not applicable if when, or to the extent that, an insured named in the policy makes a written rejection of the coverage on behalf of all insureds under the policy. If When a motor vehicle is leased for a period of 1 year or longer and the lessor of such vehicle, by the terms of the lease contract, provides liability coverage on the leased vehicle, the lessee of such vehicle has shall have the sole privilege to reject uninsured motorist coverage or to select lower limits than the bodily injury liability limits, regardless of whether the lessor is qualified as a self-insurer pursuant to s. 324.171. Unless an insured, or a lessee having the privilege of rejecting uninsured motorist coverage, requests such coverage or requests higher uninsured motorist limits in writing, the

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coverage or such higher uninsured motorist limits need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits when an insured or lessee had rejected the coverage. When an insured or lessee has initially selected limits of uninsured motorist coverage lower than her or his bodily injury liability limits, higher limits of uninsured motorist coverage need not be provided in or supplemental to any other policy that which renews, extends, changes, supersedes, or replaces an existing policy with the same bodily injury liability limits unless an insured requests higher uninsured motorist coverage in writing. The rejection or selection of lower limits must shall be made on a form approved by the office. The form must shall fully advise the applicant of the nature of the coverage and must shall state that the coverage is equal to bodily injury liability limits unless lower limits are requested or the coverage is rejected. The heading of the form must shall be in 12-point bold type and must shall state: "You are electing not to purchase certain valuable coverage that which protects you and your family or you are purchasing uninsured motorist limits less than your bodily injury liability limits when you sign this form. Please read carefully." If this form is signed by a named insured, it will be conclusively presumed that there was an informed, knowing rejection of coverage or election of lower limits on behalf of all insureds. The insurer shall notify the named insured at least annually of her or his options as to the coverage required by this section. Such notice must shall be part of, and attached to, the notice of premium, must shall provide for a means to

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allow the insured to request such coverage, and must shall be given in a manner approved by the office. Receipt of this notice does not constitute an affirmative waiver of the insured's right to uninsured motorist coverage if where the insured has not signed a selection or rejection form. The coverage described under this section must shall be over and above, but may shall not duplicate, the benefits available to an insured under any workers' compensation law, personal injury protection benefits, disability benefits law, or similar law; under any automobile medical payments expense coverage; under any motor vehicle liability insurance coverage; or from the owner or operator of the uninsured motor vehicle or any other person or organization jointly or severally liable together with such owner or operator for the accident, + and such coverage must shall cover the difference, if any, between the sum of such benefits and the damages sustained, up to the maximum amount of such coverage provided under this section. The amount of coverage available under this section may shall not be reduced by a setoff against any coverage, including liability insurance. Such coverage does shall not inure directly or indirectly to the benefit of any workers' compensation or disability benefits carrier or any person or organization qualifying as a self-insurer under any workers' compensation or disability benefits law or similar law.

(7) The legal liability of an uninsured motorist coverage insurer includes does not include damages in tort for pain, suffering, disability or physical impairment, disfigurement, mental anguish, and inconvenience, and the loss of capacity for the enjoyment of life experienced in the past and to be experienced in the future unless the injury or disease is

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described in one or more of paragraphs (a) - (d) of s. 627.737(2).

Section 47. Section 627.7275, Florida Statutes, is amended to read:

627.7275 Motor vehicle liability.-

- (1) A motor vehicle insurance policy providing personal injury protection as set forth in s. 627.736 may not be delivered or issued for delivery in this state for a with respect to any specifically insured or identified motor vehicle registered or principally garaged in this state must provide bodily injury liability coverage and unless the policy also provides coverage for property damage liability coverage as required under by s. 324.022.
- (2)(a) Insurers writing motor vehicle insurance in this state shall make available, subject to the insurers' usual underwriting restrictions:
- 1. Coverage under policies as described in subsection (1) to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state if the driving privileges were revoked or suspended pursuant to s. 316.646 or s. 324.0221 due to the failure of the applicant to maintain required security.
- 2. Coverage under policies as described in subsection (1), which includes bodily injury also provides liability coverage and property damage liability coverage, for bodily injury, death, and property damage arising out of the ownership, maintenance, or use of the motor vehicle in an amount not less than the minimum limits required under described in s. 324.021(7) or s. 324.023 and which conforms to the requirements

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of s. 324.151, to an applicant for private passenger motor vehicle insurance coverage who is seeking the coverage in order to reinstate the applicant's driving privileges in this state after such privileges were revoked or suspended under s. 316.193 or s. 322.26(2) for driving under the influence.

- (b) The policies described in paragraph (a) must shall be issued for at least 6 months and, as to the minimum coverages required under this section, may not be canceled by the insured for any reason or by the insurer after 60 days, during which period the insurer is completing the underwriting of the policy. After the insurer has completed underwriting the policy, the insurer shall notify the Department of Highway Safety and Motor Vehicles that the policy is in full force and effect and is not cancelable for the remainder of the policy period. A premium must shall be collected and the coverage is in effect for the 60-day period during which the insurer is completing the underwriting of the policy, whether or not the person's driver license, motor vehicle tag, and motor vehicle registration are in effect. Once the noncancelable provisions of the policy become effective, the bodily injury liability and property damage liability coverages for bodily injury, property damage, and personal injury protection may not be reduced below the minimum limits required under s. 324.021 or s. 324.023 during the policy period.
- (c) This subsection controls to the extent of any conflict with any other section.
- (d) An insurer issuing a policy subject to this section may cancel the policy if, during the policy term, the named insured, or any other operator who resides in the same household or

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customarily operates an automobile insured under the policy, has his or her driver license suspended or revoked.

(e) This subsection does not require an insurer to offer a policy of insurance to an applicant if such offer would be inconsistent with the insurer's underwriting guidelines and procedures.

Section 48. Effective upon this act becoming a law, section 627.7278, Florida Statutes, is created to read:

627.7278 Applicability and construction; notice to policyholders.-

- (1) As used in this section, the term "minimum security requirements" means security that enables a person to respond in damages for liability on account of crashes arising out of the ownership, maintenance, or use of a motor vehicle, in the amounts required by s. 324.022(1), as amended by this act.
 - (2) Effective January 1, 2022:
- (a) Motor vehicle insurance policies issued or renewed on or after that date may not include personal injury protection.
- (b) All persons subject to s. 324.022, s. 324.032, s. 627.7415, or s. 627.742 must maintain at least minimum security requirements.
- (c) Any new or renewal motor vehicle insurance policy delivered or issued for delivery in this state must provide coverage that complies with minimum security requirements.
- (d) An existing motor vehicle insurance policy issued before that date which provides personal injury protection and property damage liability coverage that meets the requirements of s. 324.022 on December 31, 2021, but which does not meet minimum security requirements on or after January 1, 2022, is

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deemed to meet minimum security requirements until such policy is renewed, nonrenewed, or canceled on or after January 1, 2022. Sections 627.730-627.7405, 400.9905, 400.991, 456.057, 456.072, 627.7263, 627.727, 627.748, 627.9541(1)(i), and 817.234, Florida Statutes 2020, remain in full force and effect for motor vehicle accidents covered under a policy issued under the Florida Motor Vehicle No-Fault Law before January 1, 2022, until the policy is renewed, nonrenewed, or canceled.

- (3) Each insurer shall allow each insured who has a new or renewal policy providing personal injury protection which becomes effective before January 1, 2022, and whose policy does not meet minimum security requirements on or after January 1, 2022, to change coverages so as to eliminate personal injury protection and obtain coverage providing minimum security requirements, which shall be effective on or after January 1, 2022. The insurer is not required to provide coverage complying with minimum security requirements in such policies if the insured does not pay the required premium, if any, by January 1, 2022, or such later date as the insurer may allow. The insurer also shall offer each insured medical payments coverage pursuant to s. 627.7265. Any reduction in the premium must be refunded by the insurer. The insurer may not impose on the insured an additional fee or charge that applies solely to a change in coverage; however, the insurer may charge an additional required premium that is actuarially indicated.
- (4) By September 1, 2021, each motor vehicle insurer shall provide notice of this section to each motor vehicle policyholder who is subject to this section. The notice is subject to approval by the office and must clearly inform the



policyholder that:

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- (a) The Florida Motor Vehicle No-Fault Law is repealed effective January 1, 2022, and that on or after that date, the insured is no longer required to maintain personal injury protection insurance coverage, that personal injury protection coverage is no longer available for purchase in this state, and that all new or renewal policies issued on or after that date will not contain that coverage.
- (b) Effective January 1, 2022, a person subject to the financial responsibility requirements of s. 324.022 must maintain minimum security requirements that enable the person to respond to damages for liability on account of accidents arising out of the use of a motor vehicle in the following amounts:
- 1. Twenty-five thousand dollars for bodily injury to, or the death of, one person in any one crash and, subject to such limits for one person, in the amount of \$50,000 for bodily injury to, or the death of, two or more persons in any one crash; and
- 2. Ten thousand dollars for damage to, or destruction of, the property of others in any one crash.
- (c) Bodily injury liability coverage protects the insured, up to the coverage limits, against loss if the insured is legally responsible for the death of or bodily injury to others in a motor vehicle accident.
- (d) Effective January 1, 2022, each policyholder of motor vehicle liability insurance purchased as proof of financial responsibility must be offered medical payments coverage benefits that comply with s. 627.7265. The insurer must offer medical payments coverage at limits of \$5,000 and \$10,000



without a deductible. The insurer may also offer medical payments coverage at other limits greater than \$5,000 and may offer coverage with a deductible of up to \$500. Medical payments coverage pays covered medical expenses, up to the limits of such coverage, for injuries sustained in a motor vehicle crash by the named insured, resident relatives, and any person operating the insured motor vehicle with the permission of a named insured. Medical payments coverage also provides a death benefit of at least \$5,000.

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======= T I T L E A M E N D M E N T ========= And the title is amended as follows:

Delete lines 206 - 241

344 and insert:

> medical payments coverage must protect; specifying the minimum medical expense and death benefit limits; specifying coverage options an insurer is required and authorized to offer; providing that each motor vehicle insurance policy furnished as proof of financial responsibility is deemed to have certain coverages; requiring that certain rejections or selections be made on forms approved by the office; providing requirements for such forms; providing that certain coverage is not required to be provided in certain policies under certain circumstances; requiring insurers to provide certain notices to policyholders; providing construction relating to limits on certain other coverages; requiring insurers, upon receiving certain notice of an accident, to hold a specified

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reserve for certain purposes for a certain timeframe; providing that the reserve requirement does not require insurers to establish a claim reserve for accounting purposes; specifying that an insurer providing medical payments coverage benefits may not seek a lien on a certain recovery and may not bring a certain cause of action; authorizing insurers to include policy provisions allowing for subrogation, under certain circumstances, for medical payments benefits paid; providing construction; specifying a requirement for an insured for repayment of medical payments benefits under certain circumstances; prohibiting insurers from including policy provisions allowing for subrogation for death benefits paid; amending s. 627.727, F.S.; revising the legal liability of an uninsured motorist coverage insurer; conforming provisions to changes made by the act; amending s. 627.7275, F.S.; revising required coverages for a motor vehicle insurance policy; conforming provisions to changes made